Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I2000000195

Phone : (850) 521-1000

Fax Number

: (850)558-1515

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

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## REGISTERED AGENT CHANGE AMBANK SERVICES, INC.

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Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 6 ange is submitted for a corporation organized er to change its registered office or registered	d under the laws of the State of $\underline{N}$	Iississippi
1. The name of	the corporation: AMBANK SERVICES,	INC.	
	l office address:		
3. The mailing a	address (if different):		
4. Date of incor	rporation/qualification: 05/26/2006	Document number: F060000	04005
	nd street address of the current registered agentartment of State:	nt and registered office on file with	n the
	C T Corporation System		<b>1</b> 5
	1200 Pine Island Road		10 MAY 18
	Plantation, FL 33324		8 - 8
6. The name an (if changed):	nd street address of the new registered agent (	if changed) and /or registered offic	AH 9: 52 OF STATE EE. FLORIB
	Corporation Service Company		<b>8</b> 紀 <b>52</b>
	1201 Hays Street	•	سد.
•	(P.O. Box NOT acceptable)		
	Tallahassee, FL 32301		
The street addr	ress of its registered office and the street add l be identical.	dress of the business office of its	registered agent,
Such change wauthorized by t	as authorized by resolution duly adopted by the board, or the corporation has been notifi	y its board of directors or by an eled in writing of the change.	officer so
(Signal	ture of an officer or director)	R. Mark Watkil	1 <b>C</b>
I hereby accept I further agree of my duties, an document is be corporation ha	It the appointment as registered agent and a to comply with the provisions of all statute and I am familiar with and accept the obliga sing filed merely to reflect a change in the r as been notified in writing of this change.	ngree to act in this capacity, s relative to the proper and com ution of my position as registered egistered office address, I hereb	plete performance lagent. Or, if this y confirm that the
By:	ion Service Company  Oct Company  Henature of Registered Agent)	May 11, 2010	<del></del>
If signing on be	chalf of an entity:	()	
Grace E. Kirk	by, Asst. V.P.		
(	(Typed or Printed Name)		

\* \* \* FILING FEE: \$35.00 \* \* \*